

[illegible]

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

FORM B1, Page 2

**Andrew Akre and
Lisa M. Akre****Prior Bankruptcy Case Filed Within Last 6 Years (If more than one, attach additional sheet)**

Location Where Filed:

Case Number:

Date Filed:

00-08042**Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor (If more than one, attach additional sheet)**

Name of Debtor:

Case Number:

Date Filed:

NONE

District:

Relationship:

Judge:

Signatures**Signature(s) of Debtor(s) (Individual/Joint)**

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Andrew Akre

Signature of Debtor

X /s/ Lisa M. Akre

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

10/7/2005

Date

Exhibit A

(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under Chapter 11)

☐ Exhibit A is attached and made a part of this petition**Exhibit B**

(To be completed if debtor is an individual whose debts are primarily consumer debts)

I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter.

X /s/ Beth A. Lehman**10/7/2005**

Signature of Attorney for Debtor(s)

Date

Exhibit C

Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health and safety?

☐ Yes, and exhibit C is attached and made a part of this petition.
☒ No**Signature of Attorney****X /s/ Beth A. Lehman**

Signature of Attorney for Debtor(s)

Beth A. Lehman 1610465

Printed Name of Attorney for Debtor(s)

Lehman and Fox

Firm Name

6 East Monroe

Address

Suite 1004**Chicago IL 60603****312.332.4499**

Telephone Number

10/7/2005

Date

Signature of Non-Attorney Petition Preparer

I certify that I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110, that I prepared this document for compensation, and that I have provided the debtor with a copy of this document.

Printed Name of Bankruptcy Petition Preparer

Social Security Number

Address

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

X

Signature of Bankruptcy Petition Preparer

Date

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; 18 U.S.C. § 156.

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS
EASTERN DIVISION**

In re **Andrew Akre**
and
Lisa M. Akre
fka Lisa Musial

Case No.
Chapter **13**

_____/ Debtor
Attorney for Debtor: **Beth A. Lehman**

STATEMENT PURSUANT TO RULE 2016(B)

The undersigned, pursuant to Rule 2016(b), Bankruptcy Rules, states that:

1. The undersigned is the attorney for the debtor(s) in this case.
2. The compensation paid or agreed to be paid by the debtor(s), to the undersigned is:
 - a) For legal services rendered or to be rendered in contemplation of and in connection with this case \$ 2,700.00
 - b) Prior to the filing of this statement, debtor(s) have paid \$ 500.00
 - c) The unpaid balance due and payable is \$ 2,200.00
3. \$ 194.00 of the filing fee in this case has been paid.
4. The Services rendered or to be rendered include the following:
 - a) Analysis of the financial situation, and rendering advice and assistance to the debtor(s) in determining whether to file a petition under title 11 of the United States Code.
 - b) Preparation and filing of the petition, schedules, statement of financial affairs and other documents required by the court.
 - c) Representation of the debtor(s) at the meeting of creditors.
5. The source of payments made by the debtor(s) to the undersigned was from earnings, wages and compensation for services performed, and
None other
6. The source of payments to be made by the debtor(s) to the undersigned for the unpaid balance remaining, if any, will be from earnings, wages and compensation for services performed, and
None other
7. The undersigned has received no transfer, assignment or pledge of property from debtor(s) except the following for the value stated:
None
8. The undersigned has not shared or agreed to share with any other entity, other than with members of undersigned's law firm, any compensation paid or to be paid except as follows:
None

Dated: **10/7/2005**

Respectfully submitted,

X /s/ **Beth A. Lehman**

Attorney for Petitioner: **Beth A. Lehman**
Lehman and Fox
6 East Monroe
Suite 1004
Chicago IL 60603

In re **Andrew Akre and Lisa M. Akre**

/ Debtor

Case No. _____

(if known)

SCHEDULE A-REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G-Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C-Property Claimed as Exempt.

Description and Location of Property	Nature of Debtor's Interest in Property	Current Market Value of Debtor's Interest, in Property Without Deducting any Secured Claim or Exemption	Amount of Secured Claim
	Husband--H Wife--W Joint--J Community--C		
<i>None</i>			<i>None</i>
		TOTAL \$ (Report also on Summary of Schedules.)	0.00

No continuation sheets attached

In re **Andrew Akre and Lisa M. Akre**

/ Debtor

Case No. _____

(if known)

SCHEDULE B-PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "X" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, or both own property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C-Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G-Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property."

Type of Property	None	Description and Location of Property	Husband--H Wife--W Joint--J Community--C	Current Market Value of Debtor's Interest, in Property Without Deducting any Secured Claim or Exemption
1. Cash on hand.	X			
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		<i>checking account First Midwest</i> <i>Location: In debtor's possession</i>	J	\$ 50.00
3. Security deposits with public utilities, telephone companies, landlords, and others.		<i>security deposit</i> <i>Location: In debtor's possession</i>	J	\$ 625.00
4. Household goods and furnishings, including audio, video, and computer equipment.		<i>furniture</i> <i>Location: In debtor's possession</i>	J	\$ 2,000.00
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6. Wearing apparel.		<i>clothing</i> <i>Location: In debtor's possession</i>	J	\$ 200.00
7. Furs and jewelry.	X			
8. Firearms and sports, photographic, and other hobby equipment.	X			
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10. Annuities. Itemize and name each issuer.	X			
11. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Itemize.		<i>pension</i> <i>Location: In debtor's possession</i>	J	\$ 3,000.00
12. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			

In re **Andrew Akre and Lisa M. Akre**

/ Debtor

Case No. _____

(if known)

SCHEDULE B-PERSONAL PROPERTY

(Continuation Sheet)

Type of Property	None	Description and Location of Property	Husband--H Wife--W Joint--J Community--C	Current Market Value of Debtor's Interest, in Property Without Deducting any Secured Claim or Exemption
13. Interests in partnerships or joint ventures. Itemize.	X			
14. Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
15. Accounts Receivable.	X			
16. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
17. Other liquidated debts owing debtor including tax refunds. Give particulars.	X			
18. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule of Real Property.	X			
19. Contingent and non-contingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
20. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
21. Patents, copyrights, and other intellectual property. Give particulars.	X			
22. Licenses, franchises, and other general intangibles. Give particulars.	X			
23. Automobiles, trucks, trailers and other vehicles.		<i>auto 01 Mazda Tribute</i> <i>Location: In debtor's possession</i>	J	\$ 8,000.00
24. Boats, motors, and accessories.	X			
25. Aircraft and accessories.	X			
26. Office equipment, furnishings, and supplies.	X			
27. Machinery, fixtures, equipment and supplies used in business.	X			
28. Inventory.	X			
29. Animals.	X			
30. Crops - growing or harvested. Give particulars.	X			

In re **Andrew Akre and Lisa M. Akre**

/ Debtor

Case No. _____

(if known)

SCHEDULE B-PERSONAL PROPERTY

(Continuation Sheet)

Type of Property	N o n e	Description and Location of Property	Husband--H Wife--W Joint--J Community--C	Current Market Value of Debtor's Interest, in Property Without Deducting any Secured Claim or Exemption
31. Farming equipment and implements.	X			
32. Farm supplies, chemicals, and feed.	X			
33. Other personal property of any kind not already listed. Itemize.	X			
Total ➡				\$ 13,875.00

FORM B6D (12/03) West Group, Rochester, NY

In re Andrew Akre and Lisa M. Akre / Debtor

Case No. _____
(if known)

SCHEDULE D-CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests. List creditors in alphabetical order to the extent practicable. If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column marked "Codebtor," include the entity on the appropriate schedule of creditors and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedules. Report this total also on the Summary of Schedules.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Creditor's Name and Mailing Address Including Zip Code	C o d e b t o r	Date Claim was Incurred, Nature of Lien, and Description and Market Value of Property Subject to Lien	C o n t i n g e n t	U n l i q u i d a t e d	D i s p u t e d	Amount of Claim Without Deducting Value of Collateral	Unsecured Portion, if any
Account No: 0001 Creditor # : 1 First Investors Financial Serv PO Box 740512 Atlanta GA 30374-0512	J	02 Car lien Value: \$ 8,000.00				\$ 21,338.00	\$ 13,338.00
Account No:							
Account No:							
Account No:							

No continuation sheets attached

Subtotal \$	21,338.00
(Total of this page)	
Total \$	21,338.00

(Use only on last page. Report total also on Summary of Schedules)

In re Andrew Akre and Lisa M. Akre

/ Debtor

Case No. _____

(if known)

SCHEDULE E-CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name and mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotal" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Repeat this total also on the Summary of Schedules.

☒ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(2).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$4,925* per person earned within 90 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(3).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$4,925* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(5).

☐ **Deposits by individuals**

Claims of individuals up to \$2,225* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(6).

☐ **Alimony, Maintenance or Support**

Claims of a spouse, former spouse, or child of the debtor, for alimony, maintenance, or support, to the extent provided in 11 U.S.C. § 507(a)(7).

☐ **Taxes and Certain Other Debts Owed to Governmental Units**

Taxes, custom duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to Maintain the Capital of an Insured Depository Institution**

Claims based on commitments to FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

*Amounts are subject to adjustment on April 1, 2007, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

No continuation sheets attached

Case No. _____
(if known)

SCHEDULE F-CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, if any, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedules. Report this total also on the Summary of Schedules.

☐ Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

Creditor's Name and Mailing Address including Zip Code	C o d e b o r	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	C o n t i n g e n t	U n l i q u i d a t e d	D i s p u t e d	Amount of Claim
Account No: 0923	J					\$ 300.00
Creditor # : 1 Advocate South Suburban Hospit 22091 Network Place Chicago IL 60673		Medical bill				
Account No: 96-7	J					\$ 77.00
Creditor # : 2 Advocate South Suburban Hospit 17800 Kedzie Ave Hazel crest IL 60429		Medical bill				
Account No: 91-5	J					\$ 34.00
Creditor # : 3 Advocate South Suburban Hospit 17800 Kedzie Ave Hazel crest IL 60429		Medical bill				
Account No: 6841	J					\$ 21.00
Creditor # : 4 American Medical Collection 2269 S. Saw Mill River Rd Lynwood IL 60411		Other				
<div>8 continuation sheets attached</div> <div> <div>Subtotal \$</div> <div>(Total of this page)</div> <div>Total \$</div> <div>(Report total also on Summary of Schedules)</div> </div>						432.00

FORM B6F (12/03) West Group, Rochester, NY

In re Andrew Akre and Lisa M. Akre / Debtor

Case No. _____
(if known)

SCHEDULE F-CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

Creditor's Name and Mailing Address including Zip Code	C o d e b t o r	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	C o n t i n g e n t	U n l i q u i d a t e d	D i s p u t e d	Amount of Claim
Account No: 1523 Creditor # : 5 Anderson Financial Network PO Box 3427 Bloomington IL 61702	J	Other				\$ 408.00
Account No: 3527 Creditor # : 6 Arrow Financial 5996 W. Touhy Ave Niles IL 60714	J	Collection				\$ 468.00
Account No: 6115 Creditor # : 7 Associated St James Radiology PO Box 3597 Springfield IL 62708	J	Medical bill				\$ 20.00
Account No: 4950 Creditor # : 8 Calvary Portfolio 4050 E Cotton Phoenix AZ 85040	J	Credit Card Purchases				\$ 619.00
Account No: 2110 Creditor # : 9 Capital One 4851 Cox Rd #12038-0460 Glen Allen VA 23060	J	Credit Card Purchases				\$ 738.00
Account No: 5633 Creditor # : 10 Capital One PO Box 85522 Richmond VA 23285-5015	J	Credit Card Purchases				\$ 529.00

Sheet No. 1 of 8 continuation sheets attached to Schedule of
Creditors Holding Unsecured Nonpriority Claims

Subtotal \$ (Total of this page)	2,782.00
Total \$ (Report total also on Summary of Schedules)	

FORM B6F (12/03) West Group, Rochester, NY

In re Andrew Akre and Lisa M. Akre / Debtor

Case No. _____
(if known)

SCHEDULE F-CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

Creditor's Name and Mailing Address including Zip Code	C o d e b t o r	H--Husband W--Wife J--Joint C--Community	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	C o n t i n g e n t	U n l i q u i d a t e d	D i s p u t e d	Amount of Claim
Account No: 5401 Creditor # : 11 Carson Pirie Scott PO Box 5000 Hammond IN 46325-5000	J		Credit Card Purchases				\$ 1,501.00
Account No: 9631 Creditor # : 12 Child Life PO Box 3545 Munster IN 46321							
Account No: 7625 Creditor # : 13 Citibank CBSD NA POB 6421 Sioux Falls SD 57117-6241	J		Credit Card Purchases				\$ 3,370.00
Account No: 1160 Creditor # : 14 Citibank Mastercharge POB 6000 The Lakes NV 89163-6000							
Account No: 2040 Creditor # : 15 Citibank Student Loan division PO Box 6094 Suiox Falls SD 57117-5147	J		Credit Card Purchases				\$ 3,177.00
Account No: 2401 Creditor # : 16 Collection Prof Inc. PO Box 841 Joliet IL 60434			Other				\$ 169.00

Sheet No. 2 of 8 continuation sheets attached to Schedule of
Creditors Holding Unsecured Nonpriority Claims

Subtotal \$ (Total of this page)	8,425.00
Total \$ (Report total also on Summary of Schedules)	

FORM B6F (12/03) West Group, Rochester, NY

In re Andrew Akre and Lisa M. Akre / Debtor

Case No. _____
(if known)

SCHEDULE F-CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

Creditor's Name and Mailing Address including Zip Code	C o d e b t o r	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	C o n t i n g e n t	U n l i q u i d a t e d	D i s p u t e d	Amount of Claim
Account No: 5528 Creditor # : 17 Community Healthcare System PO Box 3602 Munster IN 46321	J	Medical bill				\$ 123.00
Account No: 8584 Creditor # : 18 Community Healthcare System PO Box 3602 Minister IN 46321	J	Medical bill				\$ 243.00
Account No: 3866 Creditor # : 19 Credit Protections Ass. 1355 Noel Rd Suite 2100 Dallas TX 75240	J	Credit Card Purchases				\$ 330.00
Account No: 1523 Creditor # : 20 Credit Protections Ass. 1355 Noel Rd Suite 2100 Dallas TX 75240	J	Credit Card Purchases				\$ 544.00
Account No: 9933 Creditor # : 21 Dependon Collection Services 7627 Lake St River Forest IL 60304	J	Medical bill				\$ 53.00
Account No: 0052 Creditor # : 22 Dr. Gary L. Nordbrock D.C. C/O Thomas E. Jolas, P.C. 202 First St. N.W. Mason city Iowa 50401	J	Medical bill				\$ 154.00

Sheet No. 3 of 8 continuation sheets attached to Schedule of
Creditors Holding Unsecured Nonpriority Claims

Subtotal \$ (Total of this page)	1,447.00
Total \$ (Report total also on Summary of Schedules)	

FORM B6F (12/03) West Group, Rochester, NY

In re Andrew Akre and Lisa M. Akre / Debtor

Case No. _____
(if known)

SCHEDULE F-CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

Creditor's Name and Mailing Address including Zip Code	C o d e b t o r	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State. H--Husband W--Wife J--Joint C--Community	C o n t i n g e n t	U n l i q u i d a t e d	D i s p u t e d	Amount of Claim
Account No: 6163 Creditor # : 23 Emergency Care Health Organiza 555 W. Court St, Suite 410 Kankakee IL 60901	J	Medical bill				\$ 21.00
Account No: 7269 Creditor # : 24 GEMB/JCP PO Box 981400 El Paso TX 79998	J	Collection				\$ 427.00
Account No: 5367 Creditor # : 25 Il Collection Service Inc. 3101 W. 95th Street Evergreen Park IL 60805	J	Collection				\$ 81.00
Account No: Creditor # : 26 Kircher Vision Group 2156 W. 183rd St Homewood IL 60430	J	Medical bill				\$ 126.00
Account No: 9430 Creditor # : 27 Med 102 Wellgroup Health Partn C/O CBUSA Inc PO Box 8000 Hammond IN 46325-5000	J	Medical bill				\$ 69.00
Account No: 0001 Creditor # : 28 Med 1st James Anesthesia C/O CBUSA PO BOX 85522 Richmond VA 46325-5000	J	Medical bill				\$ 60.00

Sheet No. 4 of 8 continuation sheets attached to Schedule of
Creditors Holding Unsecured Nonpriority Claims

Subtotal \$ (Total of this page)	784.00
Total \$ (Report total also on Summary of Schedules)	

FORM B6F (12/03) West Group, Rochester, NY

In re Andrew Akre and Lisa M. Akre / Debtor

Case No. _____
(if known)

SCHEDULE F-CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

Creditor's Name and Mailing Address including Zip Code	C o d e b t o r	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	C o n t i n g e n t	U n l i q u i d a t e d	D i s p u t e d	Amount of Claim
Account No: 0260 Creditor # : 29 Medical Collection Systems 725 S. Wells, Suite 500 Chicago IL 60607	J	Medical bill				\$ 153.00
Account No: 1793 Creditor # : 30 Medical Oral Surgery Richard J. Daley Center Cook County 1st Municipal Chicago IL 60602	J	Medical bill				\$ 227.00
Account No: 6690 Creditor # : 31 Midland Credit Management 8875 Aero Dr ste 2 San Diego CA 92193	J	Collection				\$ 930.00
Account No: 4901 Creditor # : 32 Midwest Neoped Ass PO Box 2686 Carol Stream IL 60132-0502	J	Medical bill				\$ 400.00
Account No: 0813 Creditor # : 33 Mutual Hospital Services 2525 N Shadeland Ave Indianapolis IN 48219	J	Medical bill				\$ 226.00
Account No: 0462 Creditor # : 34 NCO Financial PO Box 41417 Philadelphia PA 19101	J	Collection				\$ 1,495.00

Sheet No. 5 of 8 continuation sheets attached to Schedule of
Creditors Holding Unsecured Nonpriority Claims

Subtotal \$ (Total of this page)	3,431.00
Total \$ (Report total also on Summary of Schedules)	

FORM B6F (12/03) West Group, Rochester, NY

In re Andrew Akre and Lisa M. Akre / Debtor

Case No. _____
(if known)

SCHEDULE F-CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

Creditor's Name and Mailing Address including Zip Code	C o d e b t o r	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State. H--Husband W--Wife J--Joint C--Community	C o n t i n g e n t	U n l i q u i d a t e d	D i s p u t e d	Amount of Claim
Account No: 0629 Creditor # : 35 NICOR 1844 Ferry Road Naperville IL 60563	J	Utilities				\$ 379.00
Account No: 5822 Creditor # : 36 Patients First PO Box 869359 Pano Tx 75086	J	Medical bill				\$ 98.00
Account No: 2801 Creditor # : 37 Personal Finance PO Box 615 Morris IL 60450	J	Collection				\$ 234.00
Account No: 8093 Creditor # : 38 Quest Diagnostics Incorporated POB 64804 Baltimore MD 21264-4804	J	Medical bill				\$ 145.00
Account No: 2039 Creditor # : 39 Radiology Center PO Box 3837 Springfield IL 62708	J	Medical bill				\$ 20.00
Account No: 1056 Creditor # : 40 Sallie Mae 1002 Arthur Drive lynn Haven FL 32444	J	Credit Card Purchases				\$ 2,572.00

Sheet No. 6 of 8 continuation sheets attached to Schedule of
Creditors Holding Unsecured Nonpriority Claims

Subtotal \$ (Total of this page)	3,448.00
Total \$ (Report total also on Summary of Schedules)	

FORM B6F (12/03) West Group, Rochester, NY

In re Andrew Akre and Lisa M. Akre / Debtor

Case No. _____
(if known)

SCHEDULE F-CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

Creditor's Name and Mailing Address including Zip Code	C o d e b t o r	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	C o n t i n g e n t	U n l i q u i d a t e d	D i s p u t e d	Amount of Claim
Account No: 1046	J	Credit Card Purchases				\$ 2,038.00
Creditor # : 41 Sallie Mae 1002 Arthur Dr. Lynn Haven FL 32444						
Account No: 1036	J	Credit Card Purchases				\$ 1,313.00
Creditor # : 42 Sallie Mae 1002 Arthur Drive Lynn Haven FL 32444						
Account No: 105F	J	Credit Card Purchases				\$ 2,572.00
Creditor # : 43 Sm Servicing PO Box 9500 Wilkes Barre PA 18773-4600						
Account No: 103F	J	Credit Card Purchases				\$ 1,313.00
Creditor # : 44 Sm Servicing PO Box 9500 Wilkes Barre PA 18773-4600						
Account No: 1705	J	Medical bill				\$ 312.00
Creditor # : 45 Southwest Womens Healthcare as PO Box 280 Chicago IL 60411						
Account No: 1303	J	Medical bill				\$ 97.00
Creditor # : 46 SSH Anesthesia PO Box 631 Lake Forest IL 60045						

Sheet No. 7 of 8 continuation sheets attached to Schedule of
Creditors Holding Unsecured Nonpriority Claims

Subtotal \$ (Total of this page)	7,645.00
Total \$ (Report total also on Summary of Schedules)	

FORM B6F (12/03) West Group, Rochester, NY

In re Andrew Akre and Lisa M. Akre / Debtor

Case No. _____
(if known)

SCHEDULE F-CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

Creditor's Name and Mailing Address including Zip Code	C o d e b t o r	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	C o n t i n g e n t	U n l i q u i d a t e d	D i s p u t e d	Amount of Claim
Account No: 3563 Creditor # : 47 St James Hospital C/O Mutual Hospital Collection 2525 N. Shadeland, Ste 101 Indianapolis IN 3563	J	Medical bill				\$ 1,940.00
Account No: 0101 Creditor # : 48 Sullivan Urgent Aid Center PO Box 87844 Carol Stream IL 60188-1821	J	Medical bill				\$ 93.00
Account No: Creditor # : 49 Utermark & Sons PO Box 1685 Homewood IL 60430	J	Other				\$ 203.00
Account No:						
Account No:						
Account No:						
Account No:						

Sheet No. 8 of 8 continuation sheets attached to Schedule of
Creditors Holding Unsecured Nonpriority Claims

Subtotal \$ (Total of this page)	2,236.00
Total \$ (Report total also on Summary of Schedules)	30,630.00

In re Andrew Akre and Lisa M. Akre

/ Debtor

Case No. _____

(if known)

SCHEDULE G-EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests.

State nature of debtor's interests in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease.

Provide the names and complete mailing addresses of all other parties to each lease or contract described.

NOTE: A party listed on this schedule will not receive notice of the filing of this case unless the party is also scheduled in the appropriate schedule of creditors.

☐ Check this box if the debtor has no executory contracts or unexpired leases.

Name and Mailing Address, including Zip Code, of other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether Lease is for Nonresidential Real Property. State Contract Number of any Government Contract.
<i>Jeff McGraw</i>	Contract Type: <i>Residential lease</i> Terms: Beginning date: Debtor's Interest: Description: Buyout Option:

In re Andrew Akre and Lisa M. Akre / DebtorCase No. _____
(if known)**SCHEDULE H-CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. In community property states, a married debtor not filing a joint case should report the name and address of the nondebtor spouse on this schedule. Include all names used by the nondebtor spouse during the six years immediately preceding the commencement of this case.

☒ Check this box if the debtor has no codebtors.

Name and Address of Codebtor	Name and Address of Creditor

In re **Andrew Akre and Lisa M. Akre**

/ Debtor

Case No. _____

(if known)

SCHEDULE I-CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by a married debtor in a chapter 12 or 13 case whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.

Debtor's Marital Status: Married	DEPENDENTS OF DEBTOR AND SPOUSE	
	RELATIONSHIP daughter daughter	AGE 2 11 mos
EMPLOYMENT:	DEBTOR	SPOUSE
Occupation	plumber	stock clerk
Name of Employer	Kara Plumbing	Casual Corner
How Long Employed	5 mos	1 mo
Address of Employer	123 Center Rd Frankfort IL 60004	256 Lincoln Mall Matteson IL 60443
Income: (Estimate of average monthly income)	DEBTOR	SPOUSE
Current Monthly gross wages, salary, and commissions (pro rate if not paid monthly)	\$ 4,463.33	\$ 0.00
Estimated Monthly Overtime	\$ 0.00	\$ 0.00
SUBTOTAL	\$ 4,463.33	\$ 0.00
LESS PAYROLL DEDUCTIONS		
a. Payroll Taxes and Social Security	\$ 1,157.00	\$ 0.00
b. Insurance	\$ 0.00	\$ 0.00
c. Union Dues	\$ 0.00	\$ 0.00
d. Other (Specify):	\$ 0.00	\$ 0.00
SUBTOTAL OF PAYROLL DEDUCTIONS	\$ 1,157.00	\$ 0.00
TOTAL NET MONTHLY TAKE HOME PAY	\$ 3,306.33	\$ 0.00
Regular income from operation of business or profession or farm (attach detailed statement)	\$ 0.00	\$ 0.00
Income from Real Property	\$ 0.00	\$ 0.00
Interest and dividends	\$ 0.00	\$ 0.00
Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above.	\$ 0.00	\$ 0.00
Social Security or other government assistance		
Specify: unemployment compensation	\$ 365.00	\$ 0.00
Pension or retirement income	\$ 0.00	\$ 0.00
Other monthly income		
Specify:	\$ 0.00	\$ 0.00
TOTAL MONTHLY INCOME	\$ 3,671.33	\$ 0.00
TOTAL COMBINED MONTHLY INCOME \$ 3,671.33		
(Report also on Summary of Schedules)		

Describe any increase or decrease of more than 10% in any of the above categories anticipated to occur within the year following the filing of this document:

In re Andrew Akre and Lisa M. Akre / DebtorCase No. _____
(if known)**SCHEDULE J-CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR**

Complete this schedule by estimating the average expenses of the debtor and the debtor's family. Pro rate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

Rent or home mortgage payment (include lot rented for mobile home)	\$	650.00
Are real estate taxes included? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
Is property insurance included? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
Utilities: Electricity and heating fuel	\$	350.00
Water and sewer	\$	0.00
Telephone	\$	80.00
Other cell phone	\$	20.00
Other	\$	0.00
Other	\$	0.00
Home maintenance (Repairs and upkeep)	\$	0.00
Food	\$	450.00
Clothing	\$	200.00
Laundry and dry cleaning	\$	100.00
Medical and dental expenses	\$	100.00
Transportation (not including car payments)	\$	350.00
Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	50.00
Charitable contributions	\$	600.00
Insurance (not deducted from wages or included in home mortgage payments)		
Homeowner's or renter's	\$	23.00
Life	\$	103.00
Health	\$	0.00
Auto	\$	70.00
Other	\$	0.00
Other	\$	0.00
Other	\$	0.00
Taxes (not deducted from wages or included in home mortgage)		
Specify:	\$	0.00
Installment payments: (in chapter 12 and 13 cases, do not list payments to be included in the plan)		
Auto	\$	0.00
Other:	\$	0.00
Other:	\$	0.00
Other:	\$	0.00
Alimony, maintenance, and support paid to others	\$	0.00
Payments for support of additional dependents not living at your home	\$	0.00
Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	0.00
Other: personal grooming	\$	80.00
Other: oil changes	\$	13.00
Other: additional union dues	\$	32.00
TOTAL MONTHLY EXPENSES (Report also on Summary of Schedules)	\$	3,271.00

(FOR CHAPTER 12 AND 13 DEBTORS ONLY)

Provide the information requested below, including whether plan payments are to be made bi-weekly, monthly, annually, or at some other regular interval.

A. Total projected monthly Income	\$	3,671.00
B. Total projected monthly expenses	\$	3,271.00
C. Excess Income (A minus B)	\$	400.00
D. Total amount to be paid into plan each: Weekly	\$	92.31

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS
EASTERN DIVISION**

In re **Andrew Akre and Lisa M. Akre**

Case No.
Chapter **13**

_____/ Debtor

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages on each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts from Schedules D, E and F to determine the total amount of the debtor's liabilities.

			AMOUNTS SCHEDULED		
NAME OF SCHEDULE	Attached (Yes/No)	No. of Sheets	ASSETS	LIABILITIES	OTHER
A-Real Property	Yes	1	\$ 0.00		
B-Personal Property	Yes	3	\$ 13,875.00		
C-Property Claimed as Exempt	Yes	1			
D-Creditors Holding Secured Claims	Yes	1		\$ 21,338.00	
E-Creditors Holding Unsecured Priority Claims	Yes	1		\$ 0.00	
F-Creditors Holding Unsecured Nonpriority Claims	Yes	9		\$ 30,630.00	
G-Executory Contracts and Unexpired Leases	Yes	1			
H-Codebtors	Yes	1			
I-Current Income of Individual Debtor(s)	Yes	1			\$ 3,671.33
J-Current Expenditures of Individual Debtor(s)	Yes	1			\$ 3,271.00
Total Number of Sheets in All Schedules ►		20			
Total Assets ►			\$ 13,875.00		
Total Liabilities ►				\$ 51,968.00	

In re **Andrew Akre and Lisa M. Akre**

/ Debtor

Case No. _____

(if known)

DECLARATION CONCERNING DEBTOR'S SCHEDULES**DECLARATION UNDER PENALTY OF PERJURY BY AN INDIVIDUAL DEBTOR**

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 21 sheets, and that they are true and correct to the best of my knowledge, information and belief.

Date: 10/7/2005Signature /s/ Andrew Akre
Andrew AkreDate: 10/7/2005Signature /s/ Lisa M. Akre
Lisa M. Akre

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS
EASTERN DIVISION**

In re **Andrew Akre**
and
Lisa M. Akre
fka Lisa Musial

Case No.
Chapter **13**

_____/ Debtor

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs.

Questions 1-18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19-25. If the answer to any question is "None," or the question is not applicable, mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within the six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporation debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. §101.

1. Income from employment or operation of business.

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the two years immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

SOURCE (if more than one)

Year to date:10440

wages

Last Year:53582

Year before:

2. Income other than from employment or operation of business.

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

☒ NONE

3. Payments to creditors.

a. List all payments on loans, installment purchases of goods or services, and other debts, aggregating more than \$600 to any creditor, made within 90 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

☒ NONE

b. List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

☒ NONE

4. Suits and administrative proceedings, executions, garnishments and attachments.

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

☒ NONE

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR
WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF
SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

*Name: Citibank
Address:*

2-4/05

*Description: wages
Value: 135/twice a month*

5. Repossessions, foreclosures and returns.

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

☒ NONE

6. Assignments and receiverships.

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

☒ NONE

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

☒ NONE

7. Gifts.

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

☒ NONE

8. Losses.

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

☒ NONE

9. Payments related to debt counseling or bankruptcy.

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.

<u>NAME AND ADDRESS OF PAYEE</u>	<u>DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR</u>	<u>AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY</u>
<i>Payee: Beth A. Lehman Address: 6 East Monroe Suite 1004 Chicago, IL 60603</i>	<i>Date of Payment: Payor: Andrew Akre</i>	<i>\$500.00</i>

10. Other transfers.

List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

☒ NONE**11. Closed financial accounts.**

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless spouses are separated and a joint petition is not filed.)

☒ NONE**12. Safe deposit boxes.**

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

☒ NONE**13. Setoffs.**

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

☒ NONE**14. Property held for another person.**

List all property owned by another person that the debtor holds or controls.

☒ NONE**15. Prior address of debtor.**

If the debtor has moved within the two years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

☒ NONE

16. Spouses and Former Spouses

If the debtor resides or resided in a community property state, commonwealth or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the six-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

☒ NONE

17. Environmental Information

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, release of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to disposal sites.

"Hazardous Material" means anything defined as hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law:

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

☒ NONE

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

☒ NONE

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law, with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

☒ NONE

18. Nature, location and name of business

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partnership, sole proprietorship, or was a self-employed professional within the six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within the six years immediately preceding the commencement of this case.

☒ NONE

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

☒ NONE

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of Perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct to the best of my knowledge, information, and belief.

Date 10/7/2005

Signature /s/ Andrew Akre
Andrew Akre

Date 10/7/2005

Signature /s/ Lisa M. Akre
Lisa M. Akre

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years or both, 18 U.S.C. § 152 and § 3571.

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS
EASTERN DIVISION**

In re **Andrew Akre**
and
Lisa M. Akre
fka Lisa Musial

Case No.
Chapter 13

_____/ Debtor

Attorney for Debtor: **Beth A. Lehman**

VERIFICATION OF CREDITOR MATRIX

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

Date: 10/7/2005

/s/ Andrew Akre

Debtor

/s/ Lisa M. Akre

Joint Debtor

Advocate South Suburban Hospit
Acct#: 0923
22091 Network Place
Chicago, IL 60673

Advocate South Suburban Hospit
Acct#: 96-7
17800 Kedzie Ave
Hazel crest , IL 60429

Advocate South Suburban Hospit
Acct#: 91-5
17800 Kedzie Ave
Hazel crest , IL 60429

American Medical Collection
Acct#: 6841
2269 S. Saw Mill River Rd
Lynwood, IL 60411

Anderson Financial Network
Acct#: 1523
PO Box 3427
Bloomington, IL 61702

Arrow Financial
Acct#: 3527
5996 W. Touhy Ave
Niles , IL 60714

Associated St James Radiology
Acct#: 6115
PO Box 3597
Springfield, IL 62708

Calvary Portfolio
Acct#: 4950
4050 E Cotton
Pheoenix, AZ 85040

Capital One
Acct#: 2110
4851 Cox Rd #12038-0460
Glen Allen , VA 23060

Capital One
Acct#: 5633
PO Box 85522
Richmond, VA 23285-5015

Carson Pirie Scott
Acct#: 5401
PO Box 5000
Hammond , IN 46325-5000

Child Life
Acct#: 9631
PO Box 3545
Munster, IN 46321

Acct#: 7625
POB 6421
Sioux Falls, SD 57117-6241

Citibank Mastercharge
Acct#: 1160
POB 6000
The Lakes, NV 89163-6000

Citibank Student Loan division
Acct#: 2040
PO Box 6094
Sioux Falls, SD 57117-5147

Collection Prof Inc.
Acct#: 2401
PO Box 841
Joliet , IL 60434

Community Healthcare System
Acct#: 5528
PO Box 3602
Munster, IN 46321

Community Healthcare System
Acct#: 8584
PO Box 3602
Minister , IN 46321

Credit Protections Ass.
Acct#: 3866
1355 Noel Rd Suite 2100
Dallas, TX 75240

Credit Protections Ass.
Acct#: 1523
1355 Noel Rd Suite 2100
Dallas, TX 75240

Dependon Collection Services
Acct#: 9933
7627 Lake St
River Forest, IL 60304

Dr. Gary L. Nordbrock D.C.
Acct#: 0052
C/O Thomas E. Jolas, P.C.
202 First St. N.W.
Mason city , Iowa 50401

Emergency Care Health Organiza
Acct#: 6163
555 W. Court St, Suite 410
Kankakee, IL 60901

First Investors Financial Serv
Acct#: 0001
PO Box 740512
Atlanta, GA 30374-0512

Acct#: 7269
PO Box 981400
El Paso , TX 79998

Il Collection Service Inc.
Acct#: 5367
3101 W. 95th Street
Evergreen Park, IL 60805

Kircher Vision Group
2156 W. 183rd St
Homewood, IL 60430

Med 102 Wellgroup Health Partn
Acct#: 9430
C/O CBUSA Inc
PO Box 8000
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Medical Oral Surgery
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Cook County 1st Municipal
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Midland Credit Management
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Midwest Neoped Ass
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Patient's First
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Quest Diagnostics Incorporated
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Sullivan Urgent Aid Center
Document Page 36 of 36

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